

CAP CASE # _____

DEPARTMENT OF GENERAL SERVICES
Maryland Capitol Police
NOTIFICATION OF COMPLAINT

DATE: _____

TO: _____
NAME RANK SS #

A complaint has been received concerning an incident in which you were alleged to have been involved.
The details of the complaint are as follows:

You will be apprised of other issues which may arise from the investigation of this complaint.

Investigator/s

(Signed & Received By)

Name Rank ss #

Date Detachment Commander

Note: Pages 2 and 3 are to be completed if accused is interrogated.

NOTIFICATION OF RIGHTS - WAIVER OF RIGHTS

I understand that whenever a law enforcement officer is under investigation or subjected to interrogation by a law enforcement agency, for any reason which could lead to disciplinary action, the investigation and interrogation shall be conducted in accordance with the provisions of the Law Enforcement Officer's Bill of Rights, Article 27, Sections 727-734, Annotated Code of Maryland. The following conditions governing an interrogation will be observed:

- a. Conducted at a reasonable time, preferably when the accused is on duty.
- b. Conducted at the officers's home district/pricinct, or where the alleged incident occurred.
- c. The accused shall be informed of the identity of his/her interrogators and all questions shall be asked by and through one person only.
- d. Interrogation sessions shall be for reasonable periods.
- e. A complete record, written or taped shall be kept of the interrogation and a copy may be requested by the accused not less that ten days prior to any hearing.
- f. Accused are entitled to be represented by counsel or other responsible representative during the interrogation.

For a further and more detailed explanation of your rights and the procedures to be followed, you should refer to Article 27, Sections 727-734, Annotated Code of Maryland, Law Enforcement Officer's Bill of Rights.

1. I wish to retain all of the rights afforded by the Law Enforcement Officer's Bill or Rights regarding interrogation.

_____ SIGNATURE	_____ RANK	_____ SS #
_____ DATE	_____ WITNESS	

2. I freely and voluntarily waive all rights afforded by the Law Enforcement Officer's Bill of Rights regarding interrogation.

_____ SIGNATURE	_____ RANK	_____ SS #
_____ DATE	_____ WITNESS	

This interrogation is being conducted on _____

Date and Time

at

Location

by

Name and Rank of Interrogaor

The following person/s are also present at this interrogation:

Signature of Interrogator

Date

All copies must be signed by the accused and witness.

Distribution:

1. Original placed with original case file.
2. Copy given to accused.